Region 4 Publicly Owned Treatment Works Management, Operations and Maintenance (MOM) Programs Project

Region 4 Management, Operations and Maintenance Work Group Standard Management Procedure

Results of EPA Region 4 Audit or Utility Self-Audit Review

for

Guidance and Information Purposes Only

Do Not Use Checklist as Your Self-Audit/Self Disclosure Report

NOTE THAT PAGES (2-46) THROUGH (2-47) ARE ENFORCEMENT CONFIDENTIAL -ATTORNEY CLIENT PRIVILEGED AND ARE NOT AVAILABLE UNDER FOIA ONCE COMPLETED FOR A SPECIFIC UTILITY

United States Environmental Protection Agency
Region 4
Water Management Division
Water Programs Enforcement Branch

61 Forsyth Street, SW Atlanta, Georgia 30303 February 29, 2000

Table of Contents

Table of C	ontents		i-
DISCLAIN	MER		-vi-
Chapter 1:	Region 4 Approach to Conducting Audit or Reviewing Self-Audit	1	1 - 1
1.	Definitions Used by Region 4 During the POTW MOM Project	1	1 - 2
2.	Introduction	1	l - 5
	A. Basic Concept	1	l - 5
	B. POTW Specific	1	l - 5
	C. Program Purpose	1	1 - 5
	D. Program Goal	1	l - 6
	E. Program Documentation	1	l - 6
	F. Implemented by Trained Personnel	1	l - 6
	G. Performance Measures	1	l - 7
	H. Periodic Evaluation	1	l - 7
3.	Region 4 MOM Programs Audit or Utility Self-Audit Review Procedure	1	l - 8
	A. Management Interview	1	1 - 8
	B. Field Evaluation	1	1 - 8
	C. Records Review	1	l - 8
	D. Examine Programs Relative to Performance	1	1 - 8
	E. Define Deficiencies	1	l - 9
	F. Identify Program Improvements Needed to Enhance Performance	1	l - 9
	G. Develop Schedule for Implementing Improvements	1	l - 9
4.	Information Needed for Self-Audit Policy Coverage	. 1	- 10
	A. Independent Discovery	. 1	- 11
	B. Correction and Remediation	. 1	- 12
	C. Prevention of Reoccurrence	. 1	- 13
	D. Repeat Violations	. 1	- 14
	E. Nature of Violations	. 1	- 14
	F. Cooperation	. 1	- 16
5.	Certification Needed for Self-Audit Policy Coverage	. 1	- 17
6.	Violations Must be Submitted for Self-Audit/Self Disclosure Policy Coverage	. 1	- 18
	A. Un-permitted Discharges	. 1	- 18
	B. Permit Violations	. 1	- 18

Ch	apter 2:	Region 4 Audit or Utility Self-Audit Review Work Sheet	. 2 - 1
I.	Project	Related Information Summary	. 2 - 2
Π.	Informa	ation About the Utility	. 2 - 3
III.	Profile	e of Utility - Used to Develop Site Specific Understanding of Utility	. 2 - 4
IV.	. Systei	m MOM Programs Recent Performance Summary	. 2 - 5
V.	Manag	gement Programs	. 2 - 6
	_	Table of Organization	
		1. Organizational Chart	. 2 - 6
		2. Relation to Other Departments	
	B.	Training Programs	. 2 - 7
		1. Technical Training Programs	. 2 - 7
		2. Skills Training Program (Equipment, Tasks)	. 2 - 7
		3. Safety Training Program	. 2 - 7
	C.	Safety Programs	. 2 - 8
		1. Safety Department or Committee	. 2 - 8
		2. Confined Space Entry	. 2 - 8
		3. General Safety Procedures	. 2 - 8
		4. Traffic Management	. 2 - 9
		5. Lock Out/Tag Out	. 2 - 9
		6. Safety Equipment	. 2 - 9
		7. Performance Measures	2 - 10
	D.	Utility Information Management System(s) (IMS)	2 - 10
		1. Management Programs Information Management Systems	2 - 10
		2. Operations Programs Information Management Systems	2 - 11
		3. Maintenance Programs Information Management System(s)	2 - 11
		4. Complaint Management and Tracking Information Management Systems	
			2 - 12
		5. Performance Indicators Computation Program	2 - 12
	E.	Engineering Programs	2 - 12
		1. Collection and Transmission System Plans Program	2 - 13
		2. System Inventory Program	2 - 13
		3. Mapping Program	2 - 13
		4. Sewer System Design Program	2 - 13
		5. Sewer Construction Program	
		6. Construction Inspection Program	2 - 14

	7.	Acquisition Considerations Program	2 -	- 15
	8.	Continuing Sewer System Assessment Program	2 -	- 15
	9.	Infrastructure Rehabilitation Program	2 -	- 19
	10.	System Capacity Assurance Program	2 -	- 20
F.	Sanitar	y Sewer Overflow Reporting and Notification Program	2 -	- 22
	1.	Un-permitted Discharge Reporting Program	2 -	- 22
	2.	Sanitary Sewer Overflow Notification Program	2 -	- 23
G.	Financ	ing and Cost Analysis Program	2 -	- 24
	1.	Operations Cost Analysis Program	2 -	- 24
	2.	Maintenance Cost Analysis Program	2 -	- 24
	3.	Capital Improvement Program Funding	2 -	- 24
	4.	Management Programs Cost Analysis Program	2 -	- 25
	5.	Life Cycle Cost Analysis	2 -	- 25
		Budget and Customer Rate Setting Analysis		
H.	Equipr	ment and Tools Management Programs	2 -	- 25
	1.	Spare Parts Inventory Management Program		
		Equipment and Tools Repair Management Program		
	3.	Vehicle Repair Management Program		
	4.	Supplies Management Program		
I.	Custom	er Service Programs	2 -	- 27
		Complaint Management Program		
		Public Information Program		
		Public Education Program		
J.	Legal S	upport Programs		
	1.	Inter-Jurisdictional Agreement Program		
	2.	Ordinances		
	3.	Pretreatment Legal Support Program		
	4.	Grease Control Legal Support Program		
	5.	Service Laterals Legal Support Program		
	6.	Septic Tank Haulers Legal Support Program		
		"Call Before You Dig" Legal Support Program		
K.		Quality Monitoring Program		
		Routine Water Quality Monitoring Program		
		Investigative Water Quality Monitoring Program		
		Water Quality Monitoring for Spill Impact		
L.		gency Plan for Sewer & Treatment System		
		Contingency Planning Process		
		Response Flow Diagram		
		Public Notification Plan		
	4.	Agency Notification Plan	2 -	- 33

		5. Emergency Flow Control Plan	2 - 33
		6. Emergency Operations and Maintenance Plan	2 - 34
		7. Preparedness Training Program	2 - 34
		8. Water Quality Monitoring Plan	2 - 35
VI.	Opera	ation Programs	2 - 35
	A.	Pump Station Operation Programs	2 - 35
		1. Routine Operating Programs	2 - 35
		2. Emergency Operating Programs	2 - 35
	B.	Pretreatment Programs	2 - 36
		1. Industrial User Permitting Program	2 - 36
		2. Inspection and Sampling Program	2 - 36
		3. Enforcement Program	2 - 36
	C.	Corrosion Control Programs	2 - 36
		1. Inspection Program	2 - 36
		2. Control Measures Program	2 - 36
		3. Monitoring Program	2 - 36
		4. Performance Measures	2 - 37
	D.	Grease Trap Inspection and Enforcement Programs	2 - 37
		1. Permitting Program	
		2. Inspection Program	
		3. Enforcement Program	
		4. Performance Measures	
	E.	New Connection Tap-In Program	
		1. Installation of New Service Taps	
		2. Inspection Program	
		3. Enforcement Program	
		4. Performance Measures	
	F.	Flow Monitoring Field Operation Programs	
		1. Permanent Stations	
		2. Temporary Stations	
	G.	Septic Tank Haulers Program	
		1. Permitting Program	
		2. Inspection Program	
		3. Enforcement Program	
		4. Performance Measures	
	H.	"Call Before You Dig" Program	
		1. Permitting Program	
		2. Inspection Program	
		3. Enforcement Program	2 - 38

		4. Performance Measures	2 - 38
VII.	Main	tenance Programs	2 - 38
	A.	Pump Station Preventative Maintenance	2 - 38
		Electrical Maintenance	
		2. Mechanical Maintenance	2 - 39
		3. Physical Maintenance	
	B.	Force Main Preventative Maintenance	2 - 40
		1. Air Release Valves	2 - 40
		2. Valve Exercise Program	2 - 40
	C.	Gravity Line Preventative Maintenance	2 - 41
		1. Routine Hydraulic Cleaning	2 - 41
		2. Routine Mechanical Cleaning	2 - 41
		3. Root Control Program	2 - 42
		4. Manhole Preventative Maintenance	
	D.	Maintenance of Way	
		1. Maintenance of Rights-of-Way and Easements	
		2. Monitoring of Street Paving	
		3. Line Location for Third Parties	
	E.	Un-Scheduled Maintenance	
		1. Response to Complaints	2 - 44
VIII.	Dete	ermination of Appropriate Next Step	2 - 46
	A.	State Response and Comments	2 - 46
		1. Utility's Compliance History with State	2 - 46
		2. State's Audit Review Comments	2 - 46
	B.	Reviewer's Summary	2 - 46
		1. Self-Audit Eligibility	2 - 46
		2. Enforcement Response Evaluation - September 8, 1999	
		MOM Project EMS	2 - 46
		3. Enforcement Response Evaluation - December 1996	
		EMS Guidance	
		4. EMS Penalty Calculation	
		5. Appropriate Next Step Recommendation	
	C.	Approval of Appropriate Next Step	2 - 47

DISCLAIMER

This document is the work product of the Region 4, Water Management Division, Water Programs Enforcement Branch, MOM Work Group. It is meant to be a part of the Work Group's Standard Operating Procedure for conducting the Publicly Owned Treatment Works - Management, Operations and Maintenance (MOM) Programs Project. The Project is conducted in compliance with EPA Policy, EPA Guidance, and Rules and Regulations promulgated under the Clean Water Act. If some statement or part of the document is not in compliance with the Act, EPA Policy, EPA Guidance or the Rules and Regulations, it is a mistake and should not be construed as conveying rights not conveyed by the Clean Water Act, EPA Policy, or the Rules and Regulations.

Chapter 1: Region 4 Approach to Conducting Audit or Reviewing Self-Audit

United States Environmental Protection Agency Region 4 Water Management Division Water Programs Enforcement Branch

> 61 Forsyth Street, SW Atlanta, Georgia 30303 February 29, 2000

1. Definitions Used by Region 4 During the POTW MOM Project

Capacity Related Overflow: Means an overflow that occurs when a system is not able to convey all the wastewater to the treatment plant because of insufficient grade, pipe size, wet well size, pump capacity or force main size or because of a design flaw and the overflow cannot be corrected through proper operation and maintenance.

Combined Sewer: A sewer that is designed as a sanitary sewer and a storm sewer (see 40 CFR 35.2005(b)(11)).

Chronic Overflows: Means repeated overflows at the same location in the system, repeated overflows from the system for the same root cause, or both.

Critical Part: Means any part of the utility's collection, transmission or treatment system for which the time required to acquire a replacement part would result in, or extend, a permit violation or a sanitary sewer overflow, including an un-permitted discharge. The replacement for a critical part is called a critical spare part.

Egregious Overflows: Means continuing chronic overflows or those large overflows having a root cause that utility's specific MOM program is not followed or when the utility's specific standard operating procedure or standard maintenance procedure is not followed.

Frequent Overflows: Means those overflows that, in the judgement of the regulatory authority based on system size and complexity, require a high level of improvement in a utility's management, operation and maintenance programs.

Inflow: Means water other than wastewater that enters a sewer system (including sewer service connections) from sources such as, but not limited to, roof leaders, cellar drains, yard drains, area drains, drains from springs and swampy areas, manhole covers, cross connections between storm sewers and sanitary sewers, catch basins, cooling towers, storm waters, surface runoff, street wash waters, or drainage. (see 40 CFR 35.2005(b)(20)).

Infiltration: Means water other than wastewater that enters a sewer system (including sewer service connections and foundation drains) from the ground through such means as defective pipes, pipe joints, connections, or manholes. (see 40 CFR 35.2005(b)(20)).

Infrequent Overflows: Means those overflows that, in the judgement of the regulatory authority based on system size and complexity, require some level of improvement in a utility's management, operation and maintenance programs. Usually associated with isolated overflows.

Isolated Overflows: Means those overflows that are not chronic.

Maintenance Related Overflow: Means an overflow that occurs when an adequately designed and sized system that is well operated is not able to convey all the wastewater to the treatment plant because of poor maintenance.

Municipality: Means a city, town, borough, county, parish, district, association or other public body created by or under State law and having jurisdiction over disposal of sewage, industrial wastes, or other wastes, or an Indian tribe or an authorized Indian tribal organization, or a designated and approved management agency under section 208 of the CWA (see 40 CFR 122.2)

Operations Related Overflow: Means an overflow that occurs when an adequately designed and sized system that is well maintained is not able to convey all the wastewater to the treatment plant because of poor operation.

Rainfall Induced Infiltration (RII): Means the portion of infiltration flows (flows coming from infiltration sources) that enters the sewerage system during and immediately after rainfall events. Rainfall induced infiltration does not include inflow.

Regional Collection and/or Treatment System: A collection system or treatment system that accepts wastewaters from satellite collection systems.

Sanitary Sewer: A conduit intended to carry liquid and water carried wastes from residences, commercial buildings, industrial plants and institutions together with minor quantities of ground, storm and surface waters that are not admitted intentionally. (See 40 CFR 35.2005(b)(37).)

Sanitary Sewer Overflow: A sanitary sewer overflow is an overflow, spill, release, or diversion of wastewater from a sanitary sewer system. Sanitary sewer overflows include:

- (A) overflows or releases of wastewater that reach waters of the United States;
- (B) overflows or releases of wastewater that do not reach waters of the United States; and
- (C) wastewater backups into buildings that are caused by blockages or flow conditions in a sanitary sewer other than a building lateral. Wastewater backups into buildings caused by a blockage or other malfunction of a building lateral that is privately owned is not a sanitary sewer overflow.

Satellite Collection System: Means a collection system that is owned and operated by one entity that discharge to a regional collection system that is owned and operated by a different entity.

Satellite collection systems depend on a separate entity for wastewater treatment and discharge.

SP: See Standard Management Procedure

SMP: See Standard Maintenance Procedure

SOP: See Standard Operating Procedure

Standard Management Procedure (SP): Means the steps defined by the organization that are to be followed by trained personnel in order to successfully complete a management activity or task.

Standard Maintenance Procedure (SMP): Means the steps defined by the organization that are to be followed by trained personnel in order to successfully complete a maintenance activity or task.

Standard Operating Procedure (SOP): Means the steps defined by the organization that are to be followed trained personnel in order to successfully complete a operating activity or task.

Un-Permitted Discharge: Means the discharge of wastewater containing pollutants to the waters of the United States directly or by way of the storm drainage infrastructure that is not authorized by an NPDES permit.

2. Introduction

A. Basic Concept

MOM programs are utility specific. Utilities may have different titles for the various MOM programs and may have them organized differently than we do in the Region 4 guidance. Most, if not all, of the programs used in the development of this check sheet will be part of sewerage utilities actual programs. However, individual utilities may not need to have all of the listed programs. Individual utilities may choose to consolidate some of the closely related MOM programs or individual utilities may not need all of the program because of utility specific circumstances. Finally, individual utilities may have additional MOM programs that are not contained in this check sheet.

The concept behind the Project is that the self-audit report is not to be written for Region 4. Rather, it is to be prepared for the utility management and utility policy makers and then submitted to Region 4 as evidence of program status.

The seven elements that should comprise every proper MOM program is emphasized by Region 4 during the meeting that the Region conducts in each of the Project watersheds. These are as follows:

- ! Must be POTW specific (common thread for each of the remaining six elements)
- ! Must have a purpose (take from written program documentation)
- ! Must have a defined goal (take from written program documentation)
- ! Must be in writing (incorporate by reference)
- ! Must be implemented by trained personnel (or contracted personnel)
- ! Must have performance measures (to determine program effectiveness)
- ! Must be subject to periodic evaluation (including, or beginning with, this audit)

B. POTW Specific

Region 4 has made it clear that having programs that are specific to the individual POTW means that the programs should be tailored to match the POTW's geographic, physical and climatic conditions, the system's level of complexity, the configuration of the systems infrastructure and the system's level of sophistication. Utilities may have a number of the needed MOM programs implemented through contract rather than by their own trained personnel.

C. Program Purpose

The program purpose is the reason why the program is needed and why it exists. <u>Example</u>: The purpose our utility's smoke testing program is to identify sources of inflow our sewer system that need to be eliminated so that we can regain some of our peak flow capacity.

D. Program Goal

The individual program goal(s) establishes the desired accomplishments of the individual MOM program during the upcoming fiscal year. The program goal should be summarized in the audit.

<u>Example</u>: The goal our smoke testing program for this fiscal year is to reclaim system peak capacity, and to reduce treatment plant hydraulic loading by identifying sources of inflow to the system by conducting investigations in the ABC and DEF sewer sheds. This goal will be accomplished in the most cost effective manner possible using our personnel and by using a contractor.

E. Program Documentation

The program documentation specifies, in writing, the details of the activities and procedures that are followed to implement the program. Program documentation should be referenced in the audit.

<u>Example</u>: Our utility has a long-term, ongoing, smoke testing program. The program priorities and standard operating procedures are contained in the document entitled, <u>"XYZ Utility Continuing Sewer Assessment Program, Chapter 3"</u>.

F. Implemented by Trained Personnel

The training program followed to ensure that Utility personnel are well trained to implement each program and successfully achieve each program's goals should be referenced in the audit.

<u>Example</u>: All personnel assigned to our smoke testing activity receive three hours of basic training followed by eighty (80) hours of on-the-job training to assure competency. Our contract with outside sources to conduct smoke testing requires the contractor to follow our standard operating procedures.

G. Performance Measures

Appropriate performance measures should be established for each program. This should be done on an annual basis. The audit should evaluate how well the program accomplished the program goals established at the beginning of the year and whether the program, as implemented, is the most cost effective approach.

Describe the results of the self-audit process with regard to this program. Are there program design, resource or implementation deficiencies that keep the program from achieving its performance measures? Are these program deficiencies leading to sanitary sewer overflows, permit violations or Clean Water Act violations? Are there program deficiencies leading to decreased customer service and/or unwarranted deterioration of utility assets? Are there changes that should be made to the program that will make its implementation more efficient, thereby conserving resources for better implementation of other programs? Identify remedies to correct deficiencies and include a proposed schedule for those remedies.

<u>Example</u>: During this fiscal year, the performance goal is to smoke test 200,000 lineal feet of gravity sewer in two sewersheds selected according to our priority procedures. Last year, we exceeded our performance goal of 178,000 lineal feet of gravity sewer by smoke testing 193,000 lineal feet. As a result, 623 defects were identified and passed on to our rehabilitation and private service lateral programs for correction.

H. Periodic Evaluation

Proper management, operation and maintenance program implementation requires the utility to assess performance on a regular basis, usually annually. The purpose of the evaluation is to determine whether the programs are achieving established goals and to determine if the program is being implemented efficiently and at the least cost.

<u>Example</u>: The smoke testing program has yielded good results during the past four years. Following our priority criteria, most significant inflow problems have been eliminated. Next year, the program will be reduced by 25% and the resources applied to our maintenance of way program. Peak flows will be monitored at key locations to determine if this reduction in the smoke testing program will need to be reversed in the future. Additionally, we are conducting a cost analysis to determine whether we should contract for all smoke testing work in the future.

3. Region 4 MOM Programs Audit or Utility Self-Audit Review Procedure

Region 4 uses the following procedure to conduct an audit of a sewerage utility's collection, transmission and treatment infrastructure. We suggest that Utility management adopt the same procedure, or some modification of it, when conducting their own self-audit.

A. Management Interview

Region 4 personnel conduct a series of comprehensive interviews with the utility's senior managers and program managers. The purpose of these interviews is to develop a general understanding of the utility, its management philosophy, and the scope of the utility's management, operation and maintenance programs.

B. Field Evaluation

Region 4 personnel conduct a series of field or on-site evaluations with management, operation and maintenance programs personnel. These evaluations are comprised of interviews and on-the-job observations. The purpose of these evaluations is to determine, in detail, how the specific management, operation and maintenance program activities are being carried out. The evaluations allow Region 4 personnel to assess how well personnel understand the utility's functions, how well the personnel are trained, and how closely the personnel follow the utility's standard operating procedures. Additionally, Region 4 inspect all maintenance yards and equipment, vehicles, the dispatch center and the offices where engineering related activities and information management activities are conducted.

C. Records Review

Region 4 personnel conduct a review of all the various types of the sewer utility's documents and records. Among the many such documents, these typically include at least the sewer system maps, complaint logs, work orders, sewer assessment reports, standard maintenance procedures, standard operating procedures, typical forms used by field and office personnel, table of organization, safety and training program manuals, and so on.

D. Examine Programs Relative to Performance

Following the management interviews, field evaluations, and records review, Region 4 personnel assess how system performance is affected by the various programs and the

manner in which they are implemented. An attempt is made to determine whether system failures such as sanitary sewer overflows, blockages, and back-ups are due to the lack of adequate programs, due to inadequate implementation of the programs or both. This is based upon a cursory root cause analysis of the identified system failures.

E. Define Deficiencies

As a result of the above determination, Region 4 personnel try to identify specific management, operations and maintenance program deficiencies that are leading to poor or unacceptable system performance. If Region 4 personnel are conducting the audit, a summary of all the factual information is provided to the utility prior to defining deficiencies to assure that there has been no misunderstanding develop during the earlier phases. We strongly recommend that a utility conducting its own self-audit or having a consultant perform the audit include this step prior to defining deficiencies.

F. Identify Program Improvements Needed to Enhance Performance

Once the deficiencies are identified, the next step is to list the programs, which, if improved, should lead to improved system performance. These are the programs for which the Region requires the utility to develop specific, detailed enhancements. *The development of the actual improvements is the responsibility of the utility. Region 4 may elect to review and comment on the improvements.*

G. Develop Schedule for Implementing Improvements

A major part of developing program improvements is establishing a schedule for incorporating them into the utility's overall management, operation and maintenance programs and finally, for implementing the improved programs on a daily basis. If schedules are not developed as part of an implementation plan, Region 4's audit or the utility's self-audit is not complete.

4. Information Needed for Self-Audit Policy Coverage

The following pages outline the information that any utility performing a self-audit must provide to Region 4 in order to obtain coverage under the Self-Audit/Self-Disclosure Policy. These pages *are not an official EPA form* and the required information may be provided using any other appropriate format. What is important is that the information be provided along with the certified self-audit/self disclosure report. If the utility has difficulty in understanding parts of the information request, they should call the Region 4 MOM Work Group.

U.S. EPA Region 4 POTW Management, Operation, and Maintenance Programs Project

INFORMATION NEEDED FOR SELF-AUDIT POLICY COVERAGE

This information must be provided with the participant's self-audit report and signed certification for eligibility. Self-audit coverage will typically be for violations which are un-permitted discharges to waters of the United States. Call Region 4 MOM Work Group if you have difficulty with the questions.

	Date:
Name:	
Title:	
Utility:	
NPDES Number(s) (if applicable):	
A. Independent Discovery	
Has your utility received prior notification of a disclosed or closely related violation(s)? Note that the prior notification of a disclosed or closely related violation(s)?	- ·
2. Has your utility received prior notice of comminspection or investigation, or received an informagency? "No. "Yes. If so, please explanations of the committee of the committ	nation request from a federal, state, or local

B. Correction and Remediation
To the extent that you have not already provided this information in your report disclosure, please explain in detail all measures taken to correct or remediate the violations. If you estimate that more than 60 days is needed to correct a violation, please explain fully and provide the opinion of any technical or engineering expert relied upon to arrive at that estimate. Provide an estimate of the length of time it took, or will take, to complete these measures.

C. Prevention of Reoccurrence	
To the extent that you have not already provided this information in your report disclosure, plear explain in detail all measures taken or to be taken to ensure that the violations disclosed will not repeated. Include in your discussion any improvements made to your utility's auditing or due diligence procedures to prevent recurrence of the violations.	

). F	epeat Violations
ears	ve there been the same, or closely related, violations to those disclosed within the past that were identified in a federal, state, or local agency judicial or administrative complain cement action, or settlement? "No. "Yes. If so, please explain:
he pa	ve there been the same, or closely related, violations to those disclosed at your utility with ast three years for which your utility has previously received penalty mitigation from U.S. tate or local agency? "No. "Yes. If so, please explain:
the pa	ast three years for which your utility has previously received penalty mitigation from U.S.
the paper as	ast three years for which your utility has previously received penalty mitigation from U.S.

. Did any of the environment?	e disclosed violations present immediate endangerment to public health or the "No. "Yes. If so, please provide a full explanation for each of how the
conclusion wa	, 1 1
	e disclosed violations violate the specific terms of a judicial or administrative tent agreement? "No. "Yes. If so, please identify the order(s) or :

F. Cooperation

in addition to your participation in the MOM Programs Project, please describe any other supporting information which you deem relevant to demonstrating your cooperation with U.S. EPa in disclosing these violations.

5.	Certification	Needed for	Self-Audit Police	cy Coverage
<u> </u>	Columbia	1 tooded for	Don Thank I on	o, coreinge

Submissions made under the Self-Audit/Self Disclosure Policy must be certified to Region 4 at the time of submission of the self-audit/self disclosure report. The following language and signature are required.

The Certification should be completed and signed by a public works director or other ranking official of the participating municipality.

I certify under penalty of law:
(1) that I have personally examined and am familiar with the information submitted with regard to the MOM Programs Project Self-Audit/Self-Disclosure Report and all documents submitted therewith;
(2) that to the best of my knowledge and belief, and based on my inquiry of those individuals immediately responsible for obtaining the information, the submitted information is true, accurate and complete;
(3) that the document(s) submitted to U.S. EPA Region 4 on (date) are complete and authentic, unless otherwise indicated; and,
(4) that the principle executive officer of the municipality/authority has been notified of the Report's conclusions.
I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment.
(name)
(title)
(data)

6. Violations Must be Submitted for Self-Audit/Self Disclosure Policy Coverage

In order for the utility to obtain the benefits offered by EPA's Self-Audit/Self-Disclosure Policy, all Clean Water Act and, if the utility has an NPDES permit, all permit violations that have occurred during the *past five* (5) *years* must be submitted with the self-audit/self-disclosure report.

A. Un-permitted Discharges Applicable Clean Water Act violations will typically fall into the category of un-permitted discharges to the Waters of the United States. Under most relevant circumstances these occur when a sanitary sewer overflow reaches the waters directly or by way of storm drainage infrastructure. In order to assure that the violations are addressed adequately under the policy, the following information, if existing, should be submitted for each un-permitted discharge:

Location
Name of Receiving Water
Estimate of Overflow Volume
Description of System Component
Date/Time Started/Stopped
Root Cause or Suspected Root Cause
Steps Taken to Reduce, Eliminate

In order to reduce the effort required by the utility to fulfil this policy requirement, the information may be submitted in the form of work orders, spill reports or monthly or annual summary reports when they exist. However, there must be as much detail as reasonably possible submitted to assure coverage. If in doubt, contact Region 4 to discuss the issue.

<u>B. Permit Violations</u> Applicable permit violations will typically fall into the category of effluent limit violations and/or failure to properly operate and maintain the collection, transmission and treatment system. Region 4 will retrieve effluent limit violations from either EPA's PCS database or from the State. Determination of failure to properly operate and maintain the sewerage infrastructure will be made by Region 4 based upon the self-audit review, the un-permitted discharges and the effluent limit violations.

Chapter 2: Region 4 Audit or Utility Self-Audit Review Work Sheet

United States Environmental Protection Agency Region 4 Water Management Division Water Programs Enforcement Branch

> 61 Forsyth Street, SW Atlanta, Georgia 30303 February 29, 2000

I. Project Related Information Summary State: Fiscal Year: Utility Name: Project Code: Invitation: Date: Water Shed Meeting: Date: ____ Audit Due: Date: **Audit Received:** Date: **State Copied:** Date: **Certification**: Date: **Self-Audit Coverage:** Date: **Violations Submitted: Profile Submitted:** Date: Last 12 mo. Performance: Date: EPA Project Officer: EPA Self-Audit Reviewer: Date: Review Completed: State Contact: Date: State Review Completed: Date: EPA Peer Reviewer:

II. Information About the Utility

Official Utility Name:			
Applicable NPDES Permit Numbers:			
If Satellite, NPDES Number of Regional			
Name of Responsible Official:			
Title:			
Primary Contact:	Title:	Phone:	
Secondary Contact:	Title:	Phone:	
Address:			
Mailing Address:			

III. Profile of Utility - Used to Develop Site Specific U	nderstanding of Utility
Population Served:	
Number of Customers:	
Number of Treatment Plants:	
Total Wastewater Design Treatment Capacity:	
Total Volume of Wastewater Treated:	
Miles of Gravity Sewers:	
Number of Manholes:	
Number of Inverted Siphons:	
Number of Pump Stations:	
Miles of Force Main:	
Number of Employees:	
Annual Capital Improvement Budget:	
Annual Operation and Maintenance Budget:	
Total Annual Operating Budget:	

IV. System MOM Programs Recent Performance Summary	tem MOM Programs Recent Performance Summary											
Performance Measures for Previous 12 Months	Year Month											
A. Customer Complaints												
B. (NPDES) Permit Violations												
C. Number of Capacity Related Overflows												
D. Number of Maintenance Related Overflows												
E. Number of Operations Related Overflows												
F. Number of Blockages												
G. Number of Cave-Ins												
H. Number of Pump Station Failures												
I. Peak Flow Factors at Treatment Plant (1 hour high/dry month avg.)												
J. Monthly Average Treatment Plant Flow Rate (gpcd)												
K. Monthly High One Day Treatment Flow Rate (gpcd)												
L. Number of By-Passes at Treatment Plant												
M. Volume of Treatment Plant By-Passes												
N. WWTP Weekly Average Influent BOD Concentration												

? Tag for Telephone Follow-Up	■ M If Needed, Does Utility Have Program N Is it Documented in Writing Is the Program Adequate						@	Synopsis/Comment
V. Management Programs								
A. Table of Organization	1							
1. Organizational	Chart							
a. Organizat	ional Units Shown							
b. Lines of	Authority Shown							
c. Organizat	ional Units' Functions Described							
d. Organiza	tional Units' Positions Shown							
e. Duties De	escribed							
f. Positions	Budgeted and Filled Indicated							
2. Relation to Oth	er Departments							
a. Free Stan	ding Organization							
b. Relation	o Wastewater Treatment							
c. Departme	ent of Public Works							
d. Relation	o Building Permits Function							
e. Relation t	o Building Inspector Function							
f. Are Other	Utilities Such as Gas & Electric Conducted							

Pg Topic's Location in Self-Audit /EPA Audit Report (BATES #) L M If Needed, Does Utility Have Program ? Tag for Telephone Follow-Up N Is it Documented in Writing ° Is the Program Adequate @ Is Improvement Needed (#) Indicates Cross Reference Page	Pg	?	M	N	o	@	Synopsis/Comment
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В.	. Traini	ing Programs									
	Technical Training Programs										
	a. Training and Refresher Training Requirement										
		b. Conferences, Seminars									
		c. Certification									
		d. Records									
	e. Tied to Promotion/Pay/Able to Work										
	2.	Skills Training Program (Equipment, Tasks)									
		a. Training and Refresher Training Requirement									
		b. Manufacturer/Supplier Training									
		c. Conferences, Seminars									
		d. Certification									
		e. Records									
		f. Tied to Promotion/Pay/Able to Use Equipment									

?	Pg Topic's Location in Self-Audit /EPA Audit Report (BATES #) LM If Needed, Does Utility Have Program ? Tag for Telephone Follow-Up N Is it Documented in Writing					Z	0	@	Synopsis/Comment
。 @	Is the Program Adequate Is Improvement Needed	(#) Indicates Cross Reference Page							

3.	Safety Training Program
	a. Training and Refresher Training Requirement
	b. Conferences, Seminars
	c. Weekly Safety Meetings
	d. Certification
C. Safet	y Programs (7)
1.	Safety Department or Committee
	a. Safety Department
	b. Safety Officer (Authority)
	c. Written Safety Policy
	d. Standardized Reporting Forms
	e. Review Board
2.	Confined Space Entry
	a. Locations Marked
	b. Permit System

LM If N ? Tag N Is it ° Is th	Needed, for Tele t Docum he Progr	cation in Self-Audit /EPA Audit Report (BATES #) Does Utility Have Program ephone Follow-Up nented in Writing ram Adequate ment Needed (#) Indicates Cross Reference Page	Pg	?	L M	N	٥	@	Synopsis/Comment
	<u> </u>	c. Standard Confined Space Entry Procedure	<u> </u>		T				
	3.	General Safety Procedures							
		a. Defensive Driving	T						
		b. First Aid							
		c. CPR							
		d. Personal Sanitation							
		e. Personal Protection Clothing							
	4.	Traffic Management							
		a. Standard Traffic Management Procedure							
		b. Off Hour Scheduling							
		c. Coordination with Law Enforcement							
	5.	Lock Out/Tag Out							
		a. Equipment Marked							
		b. Authorized Personnel Limitation							

c. Information on Tag (Date)

LM If NTagN Is itIs th	Needed for Te t Docu he Prog	ocation in Self-Audit /EPA Audit Report (BATES #) d, Does Utility Have Program elephone Follow-Up amented in Writing gram Adequate rement Needed (#) Indicates Cross Reference Page	Pg	?	L M	N	0	@	Synopsis/Comment
		d. Permit Required	<u> </u>	1		l		I	
	6.	Safety Equipment	1		<u> </u>	1	<u> </u>		
		a. Tripod and Hoist							
		b. Atmosphere Testing Equipment							
		c. Self Contained Breathing Apparatus							
		d. Lights and Barricades							
		e. Exhaust Fans							
		f. Personal Protection Clothing							
	7.	Performance Measures	•	ı	•	T	T		
		a. Injuries							
		b. Lost Days							
		c. Workman's Compensation Claims							
		d. Records to Management Information System							

D. Utility Information Management System(s) (IMS)

	Pg Topic's Location in Self-Audit /EPA Audit Report (BATES #) LM If Needed, Does Utility Have Program 7 Tag for Telephone Follow-Up					Z	0	@	Synopsis/Comment
N •	Is it Documented in Writing Is the Program Adequate								
@	Is Improvement Needed	(#) Indicates Cross Reference Page							

Management Programs Information Management Systems
a. Operations Summary - Daily/Weekly
b. Maintenance Summary - Daily/Weekly
c. Complaint Summary - Daily/Weekly (12)(27)
d. Rehabilitation Summary
e. System Performance Summary - Daily/Weekly
f. Computer Based
g. Management Decision Making Process
2. Operations Programs Information Management Systems
a. Operating Reports
b. Standard Forms
c. Field Supervisor Review
d. Maintenance of Records
e. Computer Based
f. Feeds into Management Information Systems

	Topic's Location in Self-Audit /EPA Audit M If Needed, Does Utility Have Program Tag for Telephone Follow-Up	Report (BATES #)	P g	?	≅┌	Z	0	@	Synopsis/Comment
。 @	Is it Documented in Writing Is the Program Adequate Is Improvement Needed	(#) Indicates Cross Reference Page							

3. Maintenance Programs Information Management System(s)
a. Maintenance Reports
b. Standard Forms
c. Field Supervisor Review
d. Maintenance of Records
e. Computer Based
f. Feeds into Management Information Systems
4. Complaint Management and Tracking Information Management Systems (10, 12)(27)
a. Complaint Reports (44)
b. Standard Forms
c. Field Supervisor Review
d. Maintenance of Records
e. Computer Based
f. Feeds into Management Information Systems
5. Performance Indicators Computation Program

LM If No? Tag f N Is it I S Is the	c's Location in Self-Audit /EPA Audit Report (BATES #) leeded, Does Utility Have Program for Telephone Follow-Up Documented in Writing e Program Adequate approvement Needed (#) Indicates Cross Reference Page	Pg	?	M	Z	0	@	Synopsis/Comment
	a. Performance of Utility Operations							
	b. Performance of Utility Maintenance							
	c. Performance of Complaint Response (12)(27)(44)							
	d. Performance of Sewer and Treatment Systems							
	e. Computer Based							
	f. Feeds into Management Information Systems							
E.	Engineering Programs							
	Collection and Transmission System Plans Program							
	a. As-Built Plans on File							
	b. Procedure for Recording Changes/Updates							
	c. Availability to Field Crews							
	2. System Inventory Program							
	a. Inventory of Sewer Attributes (age, pipe size, material, invert elevation, inverted siphons, pump stations, etc.)							
	3. Mapping Program							
	a. Mapping System							

LM If No ? Tag f N Is it I Is the	ic's Location in Self-Audit /EPA Audit Report (BATES #) Needed, Does Utility Have Program for Telephone Follow-Up Documented in Writing ne Program Adequate nprovement Needed (#) Indicates Cross Reference Page	P g	?	M	N	o	@	Synopsis/Comment
	b. Lines, Manholes, Appurtenances Coded							
	c. Information in a GIS							
	d. Links to Information Management Systems							
	4. Sewer System Design Program							
	a. Documented Design Criteria (slope, bedding, etc.)							
	b. Standard Construction Details (manholes, etc.)							
	d. Standard Materials and Construction Practices							
	e. Standard Design Review Process							
	f. Standard Review Forms							
	g. Do Construction Standards Apply to Service Laterals							
	5. Sewer Construction Program							
	a. Who Constructs New Sewers							
	b. Does Utility Review/Approve Design							
	c. Are New Sewers Under Warranty							
	6. Construction Inspection Program							

M If Ne Tag fo N Is it D Is the	's Location in Self-Audit /EPA Audit Report (BATES #) eeded, Does Utility Have Program or Telephone Follow-Up Occumented in Writing Program Adequate provement Needed (#) Indicates Cross Reference Page	Pg	?	L M	N	0	@	Synopsis/Comment
	a. Standard New Construction Inspection Procedures							
	b. Standard New Construction Testing Procedures							
	c. Does Utility do Inspection							
	d. Does Utility do Testing							
	e. Inspection/Testing Standard Forms or Reports							
	f. Inspector/Tester Qualifications							
	g. Inspection Supervision by Professional Engineer							
	h. New Sewer Construction Televised							
	7. Acquisition Considerations Program							
	a. Does Utility Acquire Sewerage Infrastructure							
	b. Pre-Acquisition Inspection/Evaluation							
	c. Comparison to Standard Design and Construction Criteria							
	8. Continuing Sewer System Assessment Program							
	a. Sewerage Assessment Priority Parameters (Information used to set	assessmer	t priori	ties)				
	i. Complaints							

M If Nee Tag for N Is it D Is the	eded, Does Utility Have Program or Telephone Follow-Up Documented in Writing Program Adequate provement Needed (#) Indicates Cross Reference Page	Pg	?	M	N	0	@	Synopsis/Comment
<u> </u>								
	ii. Flow Monitoring							
	iii. Overflows							
	iv. Pump Station Run Times							
	v. Field Crew Work Orders							
	vi. Preliminary Sewer Assessment							
	vii. Other							
	b. Date of Last SSES							
	i. Were Identified Defects Repaired							
	ii. Are defects scheduled for repair in CIP							
	iii. Is Report Available							
	c. Dyed Water Flooding Program							
	i. Standard Dyed Water Procedures							
	ii. Manhole Dyed Water Forms							
	iii. Dyed Water Inspection Performance Goals							
	iv. Dyed Water Flooding Information Management							

	Topic's Location in Self-Audit /EPA Audit Report (BATES #) M If Needed, Does Utility Have Program Tag for Telephone Follow-Up Is it Documented in Writing	P g	?	≅∟	Z	0	@	Synopsis/Comment
@	Is the Program Adequate Is Improvement Needed (#) Indicates Cross Reference Page							

d. Corrosion Defect Identification Program (36)
i. Corrosion Identification Procedures
ii. Corrosion Identification Forms
iii. Corrosion Identification Performance Goals
v. Corrosion Defect Analysis
iv. Corrosion Defect Information Management
e. Routine Manhole Inspection Program
i. Standard Manhole Inspection Procedures
ii. Manhole Inspection Forms
iii. Manhole Inspection Performance Goals
iv. Manhole Defect Analysis
v. Manhole Information Management
f. Flow Monitoring Program to Support Engineering Analyses (37)
i. Permanent Flow Meters
ii. Temporary Flow Meters

LI ?	M If Needed	d, Does U elephone imented i gram Ad	lequate	P g	?	M	N	0	@	Synopsis/Comment
			Г	<u> </u>						
			iii. Sewer Cleaning Associated with Flow Monitoring							
			iv. Midnight Flow Observations (Wet/Dry)							
			v. Rainfall Measurement							
			vi. Flow Monitoring Information Management							
		g. (CCTV Program for Sewer Assessment							
			i. Dedicated CCTV Personnel							
			ii. Dedicated CCTV Equipment							
			iii. CCTV SOPs Including Cleaning							
			iv. CCTV by Contract							
			v. CCTV Performance Measures							
			vi. CCTV Information Management							
			vii. Retention of CCTV Tapes							
		h. (Gravity System Defect Analysis Program							
			i. Standard Defect Code							
			ii. Defect Identification Guidelines							

LM If N ? Tag t N Is it ° Is the	Needed, for Tel	Does Unephone nented in Advantage (•	Page	P g	?	M	N	O	@	Synopsis/Comment
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iii. Defect Determination
i. Smoke Testing Program
i. Standard Smoke Testing Procedures
ii. Smoke Testing Forms
iii. Smoke Testing Performance Goals
iv. Smoke Testing Defect Analysis
v. Smoke Testing Information Management
j. Service Lateral Investigations Program
i. Service Lateral Investigation Techniques
ii. Service Lateral Investigation Forms
iii. Service Lateral Investigation Performance Goals
iv. Service Lateral Investigation Analysis
v. Service Lateral Investigation Information Management
k. Pump Station Performance and Adequacy Program
i. Pump Run Time Meters

? N •	If Needed	l, Does U elephone mented i gram Ad	lequate	P g	?	M	N	0	@	Synopsis/Comment
			ii. Nominal Average Pump Operating Time							
			iii. Root Cause Failure Analysis							
			iv. Remote Sensing							
			v. Pump Station Performance Information Management							
	9.	Infrasti	ructure Rehabilitation Program							
		a. (Gravity Lines Rehabilitation Program							
			i. Sewer Rehabilitation Priorities							
			ii. Sewer Rehabilitation Completed (Techniques)							
			iii. Sewer Rehabilitation Scheduled							
		b. I	Manhole Rehabilitation Program							
			i. Manhole Rehabilitation Priorities							
			ii. Manhole Rehabilitation Completed (Techniques)							
			iii. Manhole Rehabilitation Scheduled							
		c. I	Pump Station Rehabilitation Program							
			i. Pump Station Rehabilitation Priorities							

CM If ? Tag N Is i Is t	Needed, g for Tele it Docum the Progr	cation in Self-Audit /EPA Audit Report (BATES #) Does Utility Have Program ephone Follow-Up nented in Writing ram Adequate ment Needed (#) Indicates Cross Reference Page	P g	?	M	N	O	@	Synopsis/Comment
		ii. Pump Station Rehabilitation Completed							
		iii. Pump Station Rehabilitation Scheduled							
		d. Pressure System Rehabilitation Program					<u> </u>		
		i. Pressure System Rehabilitation Priorities							•
		ii. Pressure System Rehabilitation Completed							
		iii. Pressure System Rehabilitation Scheduled							
	10.	System Capacity Assurance Program							
		a. Capacity Assurance Process for New Connections	 						
		i. Integrated into Building Permit Process							
		ii. Integrated into New Acquisition Process							
		iii. Computation Techniques Used							
		b. Standard Design Flow Rate Rules of Thumb							
		i. Regarding pipe roughness							
		ii. Regarding Manhole Head Losses							
		iii. Are As-Builts Assumed to Be Accurate							

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			iv	v. Regarding gpcd							
			c. Proj	jected Flow Impact Modeling/Calculation Techniques							
			i.	. Hydraulic Model of Gravity System							
			ii	i. Limited by Pipe Diameter							

c. Projected Flow Impact Modeling/Calculation Techniques
i. Hydraulic Model of Gravity System
ii. Limited by Pipe Diameter
iii. Hydraulic Model of Pressure System
iv. Other Techniques
d. Metering of Related Existing Peak Flows
i. Are Flows Metered in Support of Analysis
ii. Are Peak Flows Manually Observed
e. Certification of Adequate Capacity
i. Does Evaluation Require P.E
ii. Does Evaluation Require Signed Certification
iii. How is Cumulative Analysis Tracked
iv. Is Analysis Related to I/I Reduction Program
f. Capacity Assurance Information Management Program

	Topic's Location in Self-Audit /EPA Audit M If Needed, Does Utility Have Program Tag for Telephone Follow-Up	Report (BATES #)	P g	?	≅┌	Z	0	@	Synopsis/Comment
。 @	Is it Documented in Writing Is the Program Adequate Is Improvement Needed	(#) Indicates Cross Reference Page							

1. Un-p	permitted Discharge Reporting Program	
a.	State Agency	
	i. State Agency Reporting Requirements	
	ii. Procedure for Meeting State Requirements	
b.	Reports to Public/Other Organizations	
	i. Downstream Drinking Water Suppliers	
	ii. Public Health Authorities	
	iii. Stream Posting	
	iv. Annual Summary Report Available to Public	
c.	Standard Form	
	i. Location	
	ii. Name of Receiving Water	
	iii. Estimate of Overflow Volume	
	iv. Description of System Component	

? N °	If Needed, Do	Adequate	Pg	?	M	N	0	@	Synopsis/Comment
		v. Date/Time Started/Stopped	<u> </u>		<u> </u>			T	
		vi. Root Cause or Suspected Root Cause							
		vii. Steps Taken or to be Taken to Reduce, Eliminate							
		l. Un-permitted Discharge Information Management							
	2. Sar	nitary Sewer Overflow Notification Program							
	8	s. State Agency							
		i. State Agency Reporting Requirements							
		ii. Procedure for Meeting State Requirements							
	t	o. Reports to Public/Other Organizations							
		ii. Public Health Authorities							
		ii. Posting							
		iii. Annual Summary Report Available to Public							
		. Standard Form	•						
		i. Location							•
		ii. Name of Receiving Water							

L M 1 ? T N Is	If Needed ag for Teles it Docur s the Prog	ocation in Self-Audit /EPA Audit Report (BATES #) I, Does Utility Have Program Ilephone Follow-Up mented in Writing gram Adequate ement Needed (#) Indicates Cross Reference Page	P g	?	L M	Z	0	@	Synopsis/Comment
		T 1		I					
		iii. Estimate of Overflow Volume							
		iv. Description of System Component							
		v. Date/Time Started/Stopped							
		vi. Root Cause or Suspected Root Cause							
		vii. Steps Taken or to be Taken to Reduce, Eliminate							
		d. Sanitary Sewer Overflow Information Management							
	G. Finar	ncing and Cost Analysis Program							
	1.	Operations Cost Analysis Program							
		a. Labor and Equipment							
		b. Activities That Can be Contracted							
	2.	Maintenance Cost Analysis Program							
		a. Labor and Equipment							
		b. Activities That Can be Contracted							
	3.	Capital Improvement Program Funding							
		a. Is There a Five Year Planning Horizon							•

СМ ? Т N I	If Needed Tag for Te Is it Docu Is the Prog	ocation in Self-Audit /EPA Audit Report (BATES #) d, Does Utility Have Program elephone Follow-Up mented in Writing gram Adequate ement Needed (#) Indicates Cross Reference Page	Pg	?	L M	N	0	@	Synopsis/Comment
		b. How Much Spent on Improvements Last Five Years							
		c. How Much to be Spent During Next Five Years							
		d. What is Current Indebtedness							
	4.	Management Programs Cost Analysis Program							
		a. Support of Other Municipal Functions							
		b. Activities That Can be Out-Sourced or Contracted							
	5.	Life Cycle Cost Analysis							
		a. Is Life Cycle Cost Analysis Used for Infrastructure							
		b. Is Life Cycle Cost Analysis Used for Equipment							
	6.	Budget and Customer Rate Setting Analysis							
		a. Is Budget Calculated on Programs' Implementation							
		b. Are User Rates Based on Budget							
	H. Equi	ipment and Tools Management Programs							
	1.	Spare Parts Inventory Management Program (Spare Parts Includes Spare	Pipe)						
		a. Spare Parts Storage Location							

• Is	Copic's Location in Self-Audit /EPA Audit Report (BATES #) If Needed, Does Utility Have Program Cag for Telephone Follow-Up s it Documented in Writing s the Program Adequate s Improvement Needed (#) Indicates Cross Reference Page	P g	?	M	Ν	0	@	Synopsis/Comment
C 18	s improvement recuca (ii) indicates cross reference rage							
	b. Critical Spare Parts Identified							
	c. Spare Parts Access Control							
	d. Spare Parts Inventory Management							
	e. Computerized							
	f. Use of Local Vendors for Common Parts							
	g. Spare Parts Carried on Vehicles							
	2. Equipment and Tools Repair Management Program							
	a. Equipment and Tools Storage Location							
	c. Equipment and Tools Access Controlled							
	d. Equipment and Tools Inventory Management							
	e. Computerized							
	3. Vehicle Repair Management Program							
	a. Vehicle Maintenance							
	b. Vehicle Repair							
	c. Turn Around Time and Cost Factor							

d. Life Cycle Costs	
4. Supplies Management Program	
a. Supplies Storage Location	•
b. Supplies Access Control	
c. Supplies Inventory Management	
d. Computerized	
e. Supplies Carried on Vehicles	
I. Customer Service Programs	
1. Complaint Management Program (12)	
a. Complaint/Customer Service	
b. Work Order Generation (44)	
c. Dispatch	
d. Standard Forms	
e. Standard Codes	

f. Follow-Up with Customer

LM 1	If Needed ag for Te	ocation in Self-Audit /EPA Audit Report (BATES #) , Does Utility Have Program lephone Follow-Up mented in Writing	I g	P	?	M	Z	0	@	Synopsis/Comment
		gram Adequate ement Needed (#) Indicates Cross Reference Page								
		g. Complaint Response Performance								
		h. Complaint Records Location								
	2.	Public Information Program								
		a. Utility's Activities Such as Smoke Testing								
		b. Notification re: Major Construction or Maintenance								
		c. Communication with Other Departments/Agencies								_
	3.	Public Education Program								
		a. Defined Public Education Program								
		b. Public Meetings								
		c. Flyers/Bill Inserts								
	J. Legal	Support Programs								
	1.	Inter-Jurisdictional Agreement Program								
		a. Agreement with Satellite System(s)								
		b. Agreement with Regional Treatment Utility(s)								
		c. Flow Based								

LM If N ? Tag N Is it ° Is th	ic's Location in Self-Audit /EPA Audit Report (BATES #) Needed, Does Utility Have Program for Telephone Follow-Up Documented in Writing ne Program Adequate mprovement Needed (#) Indicates Cross Reference Page		P g	?	M	N	0	@	Synopsis/Comment
	d. Management, Operation and Maintenance Provisions								
	e. Life of Agreement								
	f. Easily Modified								
	2. Ordinances	ı	•	1	•	T	ı	1	
	a. Sewer Use Ordinance								
	b. Grease Management Ordinance								
	c. Pretreatment Ordinance								
	d. Private Lateral Ordinance								
	d. Other Pertinent Ordinances								
	3. Pretreatment Legal Support Program (36)							_	
	a. Legal Staff Available for Case Work								
	b. Legal Staff Available for Counsel								
	c. Legal Staff Available to Modify Ordinance								
	4. Grease Control Legal Support Program								
	a. Legal Staff Available for Case Work								

M If Ta N Is Is	Needed g for Tel it Docum the Prog	cation in Self-Audit /EPA Audit Report (BATES #) , Does Utility Have Program lephone Follow-Up mented in Writing ram Adequate ment Needed (#) Indicates Cross Reference Page	Pg	?	M	Z	o	@	Synopsis/Comment
		b. Legal Staff Available for Counsel c. Legal Staff Available to Modify Ordinance							
	5.	Service Laterals Legal Support Program							
		a. Legal Staff Available for Case Work							•
		b. Legal Staff Available for Counsel							
		c. Legal Staff Available to Modify Ordinance							
	6.	Septic Tank Haulers Legal Support Program							
		a. Legal Staff Available for Case Work							
		b. Legal Staff Available for Counsel							
		c. Legal Staff Available to Modify Ordinance							
	7.	"Call Before You Dig" Legal Support Program							
		a. Legal Staff Available for Case Work							
		b. Legal Staff Available for Counsel							
		c. Legal Staff Available to Modify Ordinance							
F	K. Wate	er Quality Monitoring Program							

	Topic's Location in Self-Audit /EPA Audit M If Needed, Does Utility Have Program Tag for Telephone Follow-Up	Report (BATES #)	P g	?	≅┌	Z	0	@	Synopsis/Comment
。 @	Is it Documented in Writing Is the Program Adequate Is Improvement Needed	(#) Indicates Cross Reference Page							

1. Routine Water Quality Monitoring Program				
a. Location of Monitoring Stations				
b. Sampling Parameters				
c. Standard Sampling Procedures				
d. Quality Assurance/Quality Control Program				
e. Record Maintenance				
2. Investigative Water Quality Monitoring Program				
a. Location of Monitoring Stations				
b. Sampling Parameters				
c. Standard Sampling Procedures				
d. Quality Assurance/Quality Control Program				
e. Record Maintenance				
3. Water Quality Monitoring for Spill Impact (31)				
a. Location of Monitoring Stations				
b. Sampling Parameters				

LM If I ? Tag N Is it	ic's Location in Self-Audit /EPA Audit Report (BATES #) Needed, Does Utility Have Program for Telephone Follow-Up t Documented in Writing the Program Adequate mprovement Needed (#) Indicates Cross Reference Page	P g	?	M	N	0	@	Synopsis/Comment
	c. Standard Sampling Procedures							
	d. Quality Assurance/Quality Control Program							
L.	e. Record Maintenance Contingency Plan for Sewer & Treatment System (22)							
	Contingency Planning Process							
	a. Management Process for Developing Plan							
	b. Preparedness Committee							
	c. System Overview and Vulnerability							
	d. Severe Natural Events Considered							
	e. Failure of Critical System Component(s)							
	f. Vandalism or Third Party Events							
	g. Root Cause Analysis Protocol							
	2. Response Flow Diagram							
	a. Includes Senior Management							
	b. Includes Six (6) Major Component Plans							

	Topic's Location in Self-Audit /EPA Audit Report (BATES #) M If Needed, Does Utility Have Program Tag for Telephone Follow-Up	P g	?	≥ Γ	Z	0	@	Synopsis/Comment
1	Is it Documented in Writing							
C	Is the Program Adequate							
(Is Improvement Needed (#) Indicates Cross Reference Page							

3. Public Notification Plan	
a. Criteria Established to Initiate Public Notification	
b. Step by Step Procedure Flow Diagram	
c. Managers Named with Phone Numbers	
d. Plan for Regular Business Hours	
e. Plan for Off Hours, Week-Ends and Holidays	
f. List of "Public Contacts" with Phone Numbers	
g. Managers Authorized to Give Statements Identified	
h. Pre-Scripted News Releases	
4. Agency Notification Plan	
a. Criteria Established to Initiate Agency Notification	
b. Step by Step Procedure Flow Diagram	
c. Managers Named with Phone Numbers	
d. Plan for Regular Business Hours	
e. Plan for Off Hours, Week-Ends and Holidays	

M If Nee Tag for N Is it D Is the	s Location in Self-Audit /EPA Audit Report (BATES #) eded, Does Utility Have Program or Telephone Follow-Up occumented in Writing Program Adequate orovement Needed (#) Indicates Cross Reference Page	P g	?	L M	N	O	@	Synopsis/Comment
	f. List of "Agency Contacts" with Phone Numbers							
	g. Managers Authorized to Contact Agency(s) Identified							
	h. Standard Forms and Up-Date Forms							
	5. Emergency Flow Control Plan		1	•	•			
	a. Criteria Established to Initiate Flow Control							
	b. Flow Re-Routing							
	c. Flow Diversion							
	d. House-Hold Flow Reduction/Advisories							
	e. Commercial Flow Reduction/Advisories							
	f. Water Pressure Reduction/Advisories							
	g. Pretreatment SIU Information							
	h. Treatment Plant Options							
	6. Emergency Operations and Maintenance Plan							
	a. Criteria Established to Initiate Emergency O and M							
	b. Step by Step Procedure Flow Diagram							

LM If N ? Tag N Is it	oic's Location in Self-Audit /EPA Audit Report (BATES #) Needed, Does Utility Have Program g for Telephone Follow-Up t Documented in Writing	Pg	?	L M	N	o	@	Synopsis/Comment
	he Program Adequate Improvement Needed (#) Indicates Cross Reference Page							
	c. Managers Named with Phone Numbers	Τ						
	d. Plan for Regular Business Hours							
	e. Plan for Off Hours, Week-Ends and Holidays							-
	f. Stand-By Equipment							
	g. Stand-By Contractors							
	h. Access to Critical Spare Parts							
	7. Preparedness Training Program							
	a. Specialized Training Course							
	b. Field Trials							
	c. Special Safety Training Considerations							
	d.							
	8. Water Quality Monitoring Plan							
Operation	n Programs							
A.	Pump Station Operation Programs							
	Routine Operating Programs							

LM If N ? Tag N Is it	oic's Location in Self-Audit /EPA Audit Report (BATES #) Needed, Does Utility Have Program for Telephone Follow-Up t Documented in Writing	P g	?	M	N	0	@	Synopsis/Comment
IS U	he Program Adequate mprovement Needed (#) Indicates Cross Reference Page							
	a. Manned Pump Stations - SOPs		<u> </u>	Τ	1		1	
	b. Un-Manned Pump Stations - SOPs							
	c. Number of Crews/Personnel							
	d. Elapsed Time Meters - Record Times							
	e. System Pressure - Record Pressures							
	f. Wet Well Set Points							
	g. Check Alarms							
	h. Check Stand-By Power							
	i. Standard Forms							
	j. Established Pump Station Checking Program							
	k. Performance Measures							
	2. Emergency Operating Programs (31)							
	a. Manned Pump Stations - Emergency SOPs							
	b. Un-Manned Pump Stations - Emergency SOPs							
	c. Stand-By Power							

LM If N ? Tag t N Is it ° Is th	ic's Location in Self-Audit /EPA Audit Report (BATES #) Needed, Does Utility Have Program for Telephone Follow-Up Documented in Writing ne Program Adequate mprovement Needed (#) Indicates Cross Reference Pa	ıge	P g	?	M	N	o	@	Synopsis/Comment
				•			1		
	d. Portable Power		<u> </u>						
	e. Portable Pumping								
	f. Standard Forms								
	g. Performance Measures								
	h. Emergency By-Pass								
B.	Pretreatment Programs (Sewer and Plant Protection - Not an Evaluation	of the Pret	reatmer	nt Progr	ram) (2	29)			
	Industrial User Permitting Program								
	2. Inspection and Sampling Program								
	3. Enforcement Program								
C.	Corrosion Control Programs (16)								
	1. Inspection Program								
	2. Control Measures Program								
	3. Monitoring Program								
	4. Performance Measures								
D.	Grease Trap Inspection and Enforcement Programs								

M If ? Ta; N Is ° Is	Needed, g for Tele it Docum the Progr	cation in Self-Audit /EPA Audit Report (BATES #) Does Utility Have Program ephone Follow-Up nented in Writing cam Adequate	P g	?	L M	N	0	@	Synopsis/Comment
@ Is	Improvei	ment Needed (#) Indicates Cross Reference Page							
	1.	Permitting Program							
	2.	Inspection Program							
	3.	Enforcement Program							
	4.	Performance Measures							
F	E. New (Connection Tap-In Program							
	1.	Installation of New Service Taps							
	2.	Inspection Program							
	3.	Enforcement Program							
	4.	Performance Measures							
F	F. Flow	Monitoring Field Operation Programs (17)							
	1.	Permanent Stations							
		a. Routine Servicing							
		b. Contract							
		c. Crew Size and Equipment							
	2.	Temporary Stations							

opsis/Comment

	Topic's Location in Self-Audit /EPA Audit M If Needed, Does Utility Have Program Tag for Telephone Follow-Up	Report (BATES #)	P g	?	≥⊓	Z	0	@	Synopsis/Comment
N •	Is it Documented in Writing Is the Program Adequate								
@	Is Improvement Needed	(#) Indicates Cross Reference Page							

1.	Electrical Maintenance
	a. Manned Stations - SMPs
	b. Un-Manned Stations - SMPs
	c. Number of Crews/Personnel
	d. Scheduling
	e. Standard Forms
	f. Records
	g. Performance Measures
2.	Mechanical Maintenance
	a. Manned Stations - SMPs
	b. Un-Manned Stations - SMPs
	c. Number of Crews/Personnel
	d. Scheduling
	e. Standard Forms
	f. Records

LM IfTagN Is iIs t	Need g for The Document The Property Needs 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Location in Self-Audit /EPA Audit Report (BATES #) ed, Does Utility Have Program Telephone Follow-Up cumented in Writing ogram Adequate overnent Needed (#) Indicates Cross Reference Page	Pg	?	L M	N	0	@	Synopsis/Comment
	Τ	g. Performance Measures							
	3	3. Physical Maintenance			<u> </u>		<u> </u>		
		a. Manned Stations - SMPs							
		b. Un-Manned Stations - SMPs							
		c. Number of Crews/Personnel							
		d. Scheduling							
		e. Standard Forms							
		f. Records							

B. Force Main Preventative Maintenance

1	1	۸:	D -	lease	T7.	1

a. Number of Crews/Personnel

g. Performance Measures

- b. Scheduling
- c. Standard Forms
- d. Records

LM If N ? Tag N Is it ° Is th	Needed, for Teld t Docum he Progr	cation in Self-Audit /EPA Aud Does Utility Have Program ephone Follow-Up nented in Writing ram Adequate ment Needed	it Report (BATES #) (#) Indicates Cross Reference Page	Pg	?	•	L M	N	0	@	Synopsis/Comment
		e. Performance Measures		Τ	Τ				Т		

	e. Performance Measures
2.	Valve Exercise Program
	a. Number of Crews/Personnel
	b. Scheduling
	c. Standard Forms
	d. Records
	e. Performance Measures
C. Grav	vity Line Preventative Maintenance
1.	Routine Hydraulic Cleaning
	a. Need Determination/Scheduling
	b. Number of Crews/Personnel
	c. Equipment (Jetter, Combination Unit)
	d. Scheduling
	e. Standard Forms
	f. Records

LN	If New Tag for Is it Down Is the	eded, i or Tele ocum Progra	ation in Self-Audit /EPA Audit Report (BATES #) Does Utility Have Program phone Follow-Up ented in Writing am Adequate nent Needed (#) Indicates Cross Reference Page	P g	?	L M	N	0	@	Synopsis/Comment
			g. Performance Measures							
		2. I	Routine Mechanical Cleaning				•			

	g. Performance Measures
2	2. Routine Mechanical Cleaning
	a. Need Determination/Scheduling
	b. Number of Crews/Personnel
	c. Equipment (Rodder, Bucket Machine)
	d. Scheduling
	e. Standard Forms
	f. Records
	g. Performance Measures
3	3. Root Control Program
	a. Need Determination/Scheduling
	b. Number of Crews/Personnel
	c. Scheduling
	d. Hydraulic Root Removal
	e. Mechanical Root Removal

LM If N ? Tag f N Is it: ° Is the	ic's Location in Self-Audit /EPA Audit Report (BATES #) Needed, Does Utility Have Program for Telephone Follow-Up Documented in Writing ne Program Adequate mprovement Needed (#) Indicates Cross Reference Page	P g	?	M	N	o	@	Synopsis/Comment
	f. Chemical Control							
	g. Standard Forms							
	h. Records							
	i. Performance Measures							
	4. Manhole Preventative Maintenance							
	a. Need Determination/Scheduling							
	b. Number of Crews/Personnel							
	c. Scheduling							
	d. Rings and Lids							
	e. Structural Repair							
	f. Standard Forms							
	g. Records							
	h. Performance Measures							
D.	Maintenance of Way							
_	Maintenance of Rights-of-Way and Easements							

LM ITN IsIs	If Needed Tag for Tells it Docur is the Prog	cation in Self-Audit /EPA Audit Report (BATES #) , Does Utility Have Program lephone Follow-Up mented in Writing gram Adequate ement Needed (#) Indicates Cross Reference Page	Pg	?	M	N	0	@	Synopsis/Comment
		a. Need Determination/Scheduling		Τ	1		<u> </u>	Τ	
		b. Number of Stream Crossings							
		c. Number of Crews/Personnel							
		d. Scheduling							
		e. Standard Forms							
		f. Records							
		g. Performance Measures							
	2.	Monitoring of Street Paving							
		a. Need Determination/Scheduling							
		b. Coordination with Street/Highway Department							
		c. Manhole/Valve Raising							
		d. Performance Measures							
	3.	Line Location for Third Parties							
		a. Need Determination/Scheduling							
		b. Number of Crews/Personnel							

LM ? 1	If Needed, Fag for Tel Is it Docun Is the Prog	cation in Self-Audit /EPA Audit Report (BATES #) , Does Utility Have Program ephone Follow-Up nented in Writing ram Adequate ment Needed (#) Indicates Cross Reference Page	P g	?	M	Z	o	@	Synopsis/Comment
		c. Scheduling						<u> </u>	
		d. Standard Forms					1		
		e. Records							
		f. Performance Measures							
	E. Un-Se	cheduled Maintenance (31)							
	1.	Response to Complaints							
		a. Dispatch							
		b. Customer Follow Up							
		c. Need Determination/Scheduling							
		d. Number of Crews/Personnel							
		e. Scheduling Prioritization Protocol							
		f. Standard Forms							
		g. Records							
		h. Performance Measures (e.g. Response Time, etc.)							
		i. Mapping							

,	Topic's Location in Self-Audit /EPA Audit M If Needed, Does Utility Have Program Tag for Telephone Follow-Up Is it Documented in Writing	Report (BATES #)	P g	?	≅∟	Z	0	@	Synopsis/Comment
。 @	Is the Program Adequate Is Improvement Needed	(#) Indicates Cross Reference Page							

Detern	nination	of Appropriate Next Step							
Α	A. State	Response and Comments							
	1.	1. Utility's Compliance History with State:							
	2.	State's Audit Review Comments: 1	ncorporated	Attached Sta	te Did Not Revi	ew			
В	3. Revie	ewer's Summary							
	1.	1. Self-Audit Eligibility							
	2. Enforcement Response Evaluation - September 8, 1999 MOM Project EMS								
		Audit Timeliness:	Timely: ()	# 30 Days Late: ()	\$ 30 Days L	ate: ()	Not Submitted	d: ()	
		Audit Situation	Adequate: ()	Partially Adequate: () Incomplete: ()					
		MOM Programs Status	Adequate: ()	Need Some Improvement:	() Ne	ed Substantia	l Improvement: ())	
		MOM Programs Status Un-permitted Discharges	Adequate: () N/A: ()	Need Some Improvement: Isolated and Infrequent: ()		ed Substantia			
			•	Isolated and Infrequent: ()	Ch	ronic and Fre			

	Pg Topic's Location in Self-Audit /EPA Audit Report (BATES #) LM If Needed, Does Utility Have Program 7 Tag for Telephone Follow-Up			?	L M	N	0	@	Synopsis/Comment
N	Is it Documented in Writing								
@	Is the Program Adequate Is Improvement Needed	(#) Indicates Cross Reference Page							

		Permit Compliance - Effluent Limits: N/A: () Significant Non-Compliance Y N							
		3. Enforcement Response Evaluation - December 1996 EMS Guidance (Egregiousness)							
		4. EMS Penalty Calculation							
		5. Appropriate Next Step Recommendation: EPA Audit Letter of Commitment NOV AO APO Civil Referral							
		Enforcement Officer Name:							
		Enforcement Officer Signature: Date:							
		State Reviewer Name: Phone Number:							
		Peer Reviewer Name:							
		Peer Reviewer Signature: Date:							
	C.	Approval of Appropriate Next Step							
		Program Manager Name:							
		Program Manager Concurrence: Date:							
_		State Concurrence: Date:							
		Branch Chief Approval: Date:							